PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

mannienance lee nounca	nons.			•			could be completed where correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
CALFEE HAL 800 SUPERIOR SUITE 1400 CLEVELAND,			Cer	tificate	of Mailing or Transc		
CLEVELAND,	Off 44114						(Depositor's name)
							. (Signature)
•			L_				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTO	RNEY DOCKET NO.	CONFIRMATION NO.
10/804,493	03/18/2004		Brian W. Casto		31746/04002		7613
TITLE OF INVENTION; SECURE INTEGRATED MOBILE INTERNET PROTOCOL TRANSIT CASE							
·							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755 ·	\$0	\$0	. \$755		01/06/2009
EXAMINER		ART UNIT	CLASS-SUBCLĄSS	CLASS-SUBCLĄSS			
BEAMER,	ГЕМІСА М	370-338000	•			•	
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list Calfee, Halter & CFR 1.363).							
Change of corresp Address form PTO/SI	ondence address (or Cha 3/122) attached.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
☐ "Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	ication (or "Fee Address 2 or more recent) attach						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSI		(B) RESIDENCE: (CITY	B) RESIDENCE: (CITY and STATE OR COUNTRY)				
ICI Networks LLC Akron, OH							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government							
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.							hown above)
				d. Form PTO-2038		ched .	
	of Copies	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number(enclose an extra copy of this form).					
5. Change in Entity Status (from status indicated above)							
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
NOTE: The Issue Fee an interest as shown by the i	d Publication Fee (if req records of the United Sta	uired) will not be accepte tes Patent and Trademark	d from anyone other than the Office.	ne applicant; a regi	stered a	ttorney or agent; or th	e assignee or other party in
Authorized Signature	<i>~</i>	Peric		Date		ctober 20, 200	· · · · · · · · · · · · · · · · · · ·
Typed or printed name	Nenad Pejic		Registration N	lo	37,415.		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.							
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							